

MIAMI- DADE COUNTY BUILDING DEPARTMENT
11805 S.W. 26th Street (Coral Way), Miami, Florida 33175
www.co.miami-dade.fl.us/bldg/
(786) 315-2100

**LIGHTWEIGHT INSULATING CONCRETE (LWIC) FILL
FLORIDA BUILDING CODE (FBC)
SPECIAL INSPECTOR REPORT**

Roofing Permit No. _____

Building Permit No. _____

☐ LWIC installed over an existing deck (reroofing)

☐ LWIC installed during new construction

Property Address _____

Date(s) of installation _____

Date(s) of inspection(s) _____

LWIC Product Approval (NOA) No. _____ LWIC Manufacturer _____

LWIC installer (approved by manufacturer) _____

LWIC installer license No. _____ ☐ Building Contractor ☐ General Contractor

TYPE OF LWIC INSTALLED 1917.4.3 FBC

- ☐ Aggregate concrete
☐ Cellular type: (mechanically attached roof system)
☐ Cellular type: (adhered roof system, deck surface prepared per the roof system NOA)

Substrate the LWIC is installed over per 1917.3.12, 1917.4.1 FBC

☐ Slotted Steel Deck ☐ Existing Steel Deck ☐ Structural Concrete ☐ Existing Roof Assembly

Steel support spacing _____ ☐ Other Deck Type _____

Deck Attachment Method (per the LWIC Product Approval NOA)

☐ Puddle Weld: size _____" {Washers ☐ Yes ☐ No} Weld Spacing _____" o/c

☐ Screw Type: _____ Spacing _____" o/c

Side Lap attachment method: _____ Spacing _____" o/c

Method of venting the LWIC 1917.4.2 FBC ☐ Yes ☐ No ☐ N/A

Method of venting _____

Bonding Agent (per the LWIC Product Approval NOA) ☐ Yes ☐ No ☐ N/A

Type _____

Polystyrene (Holey Board) Insulation

Installed (per the LWIC Product Approval NOA) ☐ Yes ☐ No ☐ N/A

Installed per the approved building plans ☐ Yes ☐ No ☐ N/A

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Admixtures (Top Coat) *(per the LWIC Product Approval NOA)* ☐ Yes ☐ No ☐ N/A

Type _____

Curing Compound *(per the LWIC Product Approval NOA)* ☐ Yes ☐ No ☐ N/A

Type _____

Minimum thickness of the LWIC 1917.4.2 FBC _____

Minimum slope of the LWIC _____

Expansion Joints installed per approved permit documents and 1917.4.11 FBC

☐ Approved ☐ Disapproved ☐ N/A

Cast density recording (checked hourly)

Acceptable ranges per the LWIC NOA ☐ Yes ☐ No

Dry Density Range: _____ Pcf (depending on roof cover type)

Wet Density Range: _____ Pcf (depending on roof cover type)

28-Day Compressive Strength Range: _____ (depending on roof cover type)

Walk ability Inspection 1917.2.4 FBC

☐ Approved ☐ Disapproved Date of inspection _____

All the LWIC was installed in compliance with the requirements of the Florida Building Code section 1917, the LWIC Product Approval (NOA), and the LWIC manufacturer's recommendations and specifications.

From my observations of the mixing, installation, and finishing of the lightweight insulating concrete system, to the best of my knowledge, belief and professional judgment those portions of the project outlined above meet the intent of the Florida Building Code and are in substantial accordance with the approved permit documents.

Engineer/Architect

Name: _____

Address: _____

Phone Number: _____

Signed and Sealed

Date: _____